

Abstinence and Delayed Sexual Initiation

Promoting abstinence is an important strategy that can help delay sexual activity, but complementary messages are needed for those who are sexually active.

Complete sexual abstinence is the most effective means of protection against both pregnancy and HIV infection. Messages of abstinence appear to work best when aimed at younger youth who are not yet sexually active, especially girls. Some programs that included abstinence messages have achieved a delay in sexual initiation of about a year.

Adolescents who successfully practice abstinence require strong social support from community members and the development of specific skills, including a high degree of motivation, self-control, and communication. Programs that include comprehensive messages can teach skills for practicing abstinence as well as provide information for sexually active youth about condoms and reducing the number of partners.

Defining abstinence through behavior

The term “abstinence” means different things to different people. Most faith-based groups generally view abstinence as a commitment to refrain from sex until marriage. Others view abstinence as delaying sex until some future time, for example, when entering into a committed relationship before marriage. Or the term can refer to those who have been sexually active at one time but now have decided to abstain, referred to as “secondary abstinence” or “secondary virginity.”¹

Youth may not practice abstinence perfectly, just as they might not use condoms consistently and correctly. Some may consider themselves to be practicing abstinence if they abstain from vaginal intercourse, even if they engage in other kinds of sexual intimacy. A young person may have sex in a “weak” moment, emphasizing the need to help youth develop skills to actively practice abstinence and say no to unwanted sexual activity. Other youth may be coerced into sex. Researchers in South Africa report that 24 percent of girls were “persuaded” or “tricked” into their first sexual experience.² These data suggest that adolescents need a safe environment created by adults in which they can make decisions free from the fear of coerced sex.

Culture and language must be considered when teaching adolescents about abstinence. In a study of 100 Namibian youth, most thought “abstinence” meant “to be absent.”³ Employing phrases clear in the cultural context is essential, such as the Uganda campaign for partner reduction and fidelity, which used the local term, “zero grazing.”

Delaying sexual initiation

Throughout the world, puberty is occurring at earlier ages while the age of marriage is generally rising. This combination of factors results in a longer time period during which unmarried youth have the opportunity for sexual activity, often in a pattern of a series of monogamous relationships.





Practical skills, coupled with social support from family members and peers, are essential for adolescents to achieve the confidence and ability to refrain from early sexual activity.

An analysis of survey data among 15- to 19-year-olds found that more than 25 percent of boys reported having sex before they were 15 in Brazil, Gabon, Haiti, Hungary, Kenya, Latvia, Malawi, Mozambique, and Nicaragua. For girls, the percentages in the same countries were somewhat lower, but generally over 15 percent.⁴ In some countries, sexual debut among a small minority of youth occurs as early as age 10.

Early sexual debut can place adolescents at increased risk of unintended pregnancy, HIV, and other sexually transmitted infections (STIs). Youth who begin sexual activity early appear more likely to have sex with high-risk partners or multiple partners and are less likely to use condoms.⁵ Many factors affect the timing of first sex. A World Health Organization review of studies in 53 countries found common protective and risk factors in all regions of the world: positive relationships with parents, teachers, and spiritual beliefs decreased the likelihood of early sex, while risk factors included engaging in other hazardous behaviors and having friends who are sexually active.⁶

During the late 1980s and early- to mid-1990s, a wide-scale anti-AIDS campaign in Uganda that included messages of abstinence resulted in a decline in HIV rates.⁷ From 1989 to 1995 in Uganda, the proportion of 15- to 19-year-olds reporting that they “never had sex” rose from 31 percent to 56 percent among males and from 26 percent to 46 percent among females.⁸

A major six-country study indicates that programs including abstinence messages resulted in a delay of sexual initiation of about a year in some countries where HIV prevalence declined. The study found that Uganda as well as Zambia showed an increase in the median age of sexual debut, along with reports of fewer sexual partners and higher condom use. In Uganda, the age of sexual debut among girls increased from 16.5 to 17.3, and for boys, from 17.6 to 18.3 years.

In Zambia, over a five-year span, the age at first sex for young men went from 16.2 to 18.1 years, but for the girls, the age of sexual debut stayed about the same, at 17.1 years. Meanwhile, the age of sexual initiation did not rise in Cameroon, Kenya, or Zimbabwe, countries that did not experience significant declines in HIV prevalence.⁹

The study concluded that declines in HIV prevalence in Uganda and Zambia are probably due primarily to declines in multiple partnerships – though abstinence and delayed sexual initiation among youth, along with condom use with non-regular partners, also contributed to the declines. Yet despite an increase in age of sexual debut in Uganda and Zambia, young women still had an earlier age of sexual debut than their counterparts in Kenya and Zimbabwe. Cameroonian women, with the earliest onset of sexual debut for girls and the second youngest for boys, had lower rates of HIV infection. So, the age of sexual initiation – i.e., the impact of abstinence – did not alone account for lower HIV rates.

The study also found no measurable decline in fertility rates that can be attributed to the delay in age of sexual debut among youth. Fertility rates in countries without significant changes in sexual behavior declined to a greater extent than they did in Uganda, probably due to increased use of modern contraceptives in the former.

Programs target abstinence

Practical skills, coupled with social support from family members and peers, are essential for adolescents to achieve the confidence and ability to refrain from early sexual activity. Skills can include making an “abstinence plan” so that adolescents are prepared to handle pressure and successfully say no to sex (see sidebar). While abstinence messages may have the most impact on youth who have not yet initiated sex, some older youth also appear to respond to the choice of secondary abstinence.

HIV prevention interventions in a school district in South Africa and a teachers' college in Thailand found that most youth, including those who had sporadic sexual activity, did not intend to be sexually active and that many considered practicing secondary abstinence. The study concluded that females and younger youth respond to abstinence messages more strongly than other groups. Many youth chose secondary abstinence because they wanted to protect their health and because they were not ready to have sex. The programs taught skills in refusal, negotiation, and planning in a comprehensive approach, promoting abstinence as well as condom use for sexually active youth.¹⁰

Some media campaigns have also successfully contributed to delay in sexual initiation. The HEART Campaign (Helping Each Other Act Responsibly Together) in Zambia, designed by youth for youth, promotes abstinence and condom use, while including information about HIV/AIDS and protection against infection. The campaign included slogans such as “Virgin Power, Virgin Pride” and “Abstinence is Cool” and used television and radio announcements targeting young people aged 13 to 19. A year after the campaign, a survey of more than 1,000 youth compared sexual behaviors of viewers of the campaign to nonviewers, holding factors such as age, sex, education, and residence constant. Viewers were 46 percent more likely to be practicing primary or secondary abstinence and were 67 percent more likely to have used a condom at last sex.¹¹

In Jamaica, a mass media campaign of the Youth.now project is using a segmented approach based on age to address the reproductive health needs of adolescents. In Jamaica, the average age of sexual initiation is 13.2 years for boys and 15.2 years for girls. The program promoted abstinence for youth ages 10 to 12, emphasized increased self-knowledge and abstinence for youth ages 13 to 15, and promoted protection from unintended pregnancy, HIV, and other STIs for older youth.¹²

More than half of the youth who recalled the ads said the ads had influenced how they handle boy/girl relationships through abstaining from sex, not giving into sexual pressure, and always using a condom/contraceptive when having sex.

On the other hand, some programs promote abstinence alone. Uganda First Lady Janet Museveni started the Uganda Youth Forum in 1992 as part of the overall AIDS prevention campaign in the country. Through a series of conferences, life skills programs, community service projects, and abstinence support groups, the Youth Forum reports some 40,000 young people have signed

PRACTICING ABSTINENCE REQUIRES A STRATEGY

Be clear about why you want to wait

- List your reasons. Talk them over with someone who supports you.
- Check your list from time to time to remind yourself.

Have a plan

- Know what situations might make it hard to stick with your choice.
- Decide ahead of time what you'll do to avoid or deal with them, such as leaving a scene when being pressured to have sex.

Be impressed with yourself

- It can be hard to go against the crowd and make your own choices.
- Give yourself credit. You deserve it.

Notice the pressures

- Pay special attention to messages in music, videos, and movies telling you to have sex.

Get support

- Hang out with friends who know about and respect your decisions.
- Avoid people who might pressure you.
- If pressured, threaten to tell someone in authority (a relative, police).

Practice communication skills

- Learn to say “No!” emphatically or “No, no, no” repeatedly.
- Give a reason such as “I’m not ready” or “I’ve decided to wait until I’ve achieved my academic goals.”
- Turn the tables: “You say that if I love you I would, but if you really love me, you wouldn’t insist.”

Adapted from Abstinence Focus Poster No. R045, Scotts Valley, CA: ETR Publishing, 2002; and Grossman L, Kowal D. *Kids, Drugs, and Sex. Preventing Trouble*. Brandon, VT: Clinical Psychology Publishing Co., 1987.

a commitment to abstinence and “True Love Waits” cards. No evaluation of the program has been reported.¹³

In the United States, a study analyzed a program that encouraged teens to pledge to remain virgins until they marry. The study found these young people are much less likely to have sexual intercourse than adolescents who do not take the pledge. However, the study also found that the pledges were effective only when taken among a subset of a larger group, not when targeted to all youth in a school or other setting.¹⁴

A comprehensive and segmented approach is needed to reach youth in an effort to prevent HIV infection and promote reproductive health. Policy-makers and adults also can contribute to delaying early sexual debut in youth by making the reduction of coercive sex a priority. Abstinence messages need to be an integral part of HIV/STI/pregnancy prevention programs worldwide, especially for programs targeting younger youth and girls. But not all youth are sexually abstinent, and a comprehensive approach is needed, with education about using condoms for protection against unwanted pregnancy and HIV/STIs, as well as reducing the number of sexual partners.

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